

PD5000089347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

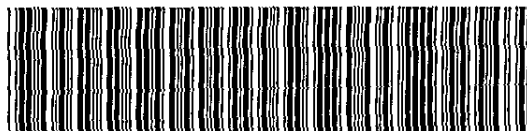
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/10/05--01043--001 **78.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 JUN 22 AM 9:05

1005-29001

mrs
6/22

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: AZUCAR BEAUTY SALON, INC

~~(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)~~

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: MARCIANA GARCIA

Name (Printed or typed)

5028 MURIEL LANE

Address

NEW PORT RICHEY, FL 34653

City, State & Zip

727-841-8861

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

New Port Richey, FL 6/16/2005

FLORIDA DEPARTMENT OF STATE
Division of Corporations
PO Box 6327
Tallahassee, FL 32314


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SECRETARY OF STATE
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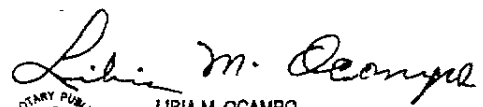

RE: AZUCAR BEAUTY SALON INC
No. W05000029001

Dear Ms. Dunlap,

I, **STELLA STEFENN** certify that I have no intention of revoking the dissolution of my former incorporated named **AZUCAR BEAUTY SALON, INC**, and I will release the name for use to another entity formed by **MARCIANA GARCIA** in the same place.

Sincerely


STELLA STEFENN
12807 Willowdale Way
Hudson, FL 34667
Tel 727-861-0645



LIBIA M. OCAMPO
MY COMMISSION # DD 172043
EXPIRES: March 21, 2007
Bonded Thru Budget Notary Services
6/16/05



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 13, 2005

MARCIANA GARCIA
5028 MURIEL LANE
NEW PORT RICHEY, FL 34653

SUBJECT: AZUCAR BEAUTY SALON INC
Ref. Number: W05000029001

We have received your document for AZUCAR BEAUTY SALON INC and your check(s) totaling \$78.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved corporation or limited liability company. The name of a voluntarily dissolved Florida corporation or limited liability company is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved entity provides the Department of State with a notarized affidavit, stating they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please list the street address of each officer/director.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist
New Filings Section

Letter Number: 205A00040913

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN 22 AM 9:05

ARTICLE I NAME

The name of the corporation shall be:

AZUCAR BEAUTY SALON, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5831 MAIN STREET
NEW PORT RICHEY, FL 34652

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO BUY AN OPEN BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MARCIANA GARCIA
PRESIDENT
5028 MURIEL LN NEW PORT RICHEY FL 34653
ADALGIZA ALMONTE
VICE PRESIDENT
514 211 WEST STREET NEW YORK CITY, NY 10034

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

MARCIANA GARCIA
5028 MURIEL LANE
NEW PORT RICHEY, FL 34653

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARCIANA GARCIA
5028 MURIEL LANE
NEW PORT RICHEY, FL 34653

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Marciana Garcia
Signature/Registered Agent

6-22-05
Date

Marciana Garcia
Signature/Incorporator

6-22-05
Date